

DRAFT
CONCERNS EXPRESSED TO THE RESTRUCTURING INITIATIVE WORKGROUP

ISSUE

Consolidation of the IHS functions, especially the Office of Legislative Affairs, out of IHS into the Department of HHS.

BACKGROUND

The Indian Health Service is an agency within the Department of Health and Human Services. DHHS Secretary Thompson has issued a restructuring plan for HHS that follows the President's goals for reforming federal agencies government-wide.

To achieve a Secretary Thompson's goal to operate as "one-HHS department" in administrative and management matters, the HHS restructuring plan calls for consolidation and streamlining of administrative functions from all divisions of HHS (such as FDA, CDC, NIH, HRSA, IHS, etc.) . Specifically, the HHS restructuring plan will consolidate the following administrative offices from the IHS (and from sister HHS agencies):

- ❑ Facilities Management
- ❑ Public Affairs
- ❑ Legislative Affairs
- ❑ Human Resources (Personnel Offices)
- ❑ Information Technology

CONCERNS

While the President's goals for greater government efficiency, effectiveness and responsiveness to citizens is fitting, tribal leaders are concerned about the practical implications for restructuring the IHS health programs for Indian people.

- ❑ Any savings from restructuring of IHS functions must be reinvested in health services to the Indian people. Numerous statistics document the devastating consequences of poor health and disparity in access to health care services to American Indians and Alaska Natives. Any loss of funds from IHS would undermine the federal government's goals to eliminate health disparities to Indian people.
- ❑ Restructuring federal programs must not undermine or infringe upon the government-to-government relationship between tribal nations and the US government.
- ❑ Consolidation of IHS Office of Legislative Affairs and Public Affairs, either by relocation or reporting lines, will diminish their effectiveness by diminishing immediate and every day access to agency leaders, distancing working relationships, diluting focus from critical Indian health issues to other HHS initiatives, and will reduce first-hand knowledge of Indian health care issues and IHS policy dialogues that are essential to a well informed and legislative agenda addressing Indian health issues.